

FADSS COMPREHENSIVE QUALITY ASSURANCE PROCESS

State Fiscal Years 2020-22

*Iowa Department of
Human Rights,
Division of
Community Action
Agencies*

Introduction

All FaDSS grantees will engage in a comprehensive quality assurance process that includes regular review of 1) performance and outcomes indicators, 2) model fidelity based on the FaDSS program standards and 3) fiscal documentation. All components of the comprehensive quality assurance process have been designed to facilitate a cycle of continuous quality improvement with the overarching goal of achieving improved outcomes for families.

FaDSS program managers at the Division of Community Action Agencies are committed to providing monitoring and technical assistance using the following guiding principles: mutual respect, open communication, and joint problem solving.

Review Schedule

Grantee	Indicators	Model Integrity	Fiscal Review (Fiscal Reviewers)
Community Action of Eastern Iowa	Quarterly, Annually	Even Years	Annually
Community Action of Siouxland Iowa	Quarterly, Annually	Even Years	Annually
Community Action of Southeast Iowa	Quarterly, Annually	Odd Years	Annually
Four Oaks	Quarterly, Annually	Even Years	Annually
Lutheran Services in Iowa	Quarterly, Annually	Odd Years	Annually
MATURA Action Corporation	Quarterly, Annually	Odd Years	Annually
Mid-Iowa Community Action	Quarterly, Annually	Odd Years	Annually
Mid-Sioux Opportunity	Quarterly, Annually	Even Years	Annually
North Iowa Community Action	Quarterly, Annually	Even Years	Annually
Northeast Iowa Community Action	Quarterly, Annually	Odd Years	Annually
Operation Threshold	Quarterly, Annually	Even Years	Annually
Polk County	Quarterly, Annually	Odd Years	Annually
SIEDA Community Action	Quarterly, Annually	Odd Years	Annually
South Central Iowa Community Action	Quarterly, Annually	Even Years	Annually
Upper Des Moines Opportunity	Quarterly, Annually	Odd Years	Annually
West Central Community Action	Quarterly, Annually	Odd Years	Annually
Youth & Shelter Services	Quarterly, Annually	Even Years	Annually

Review of Performance and Outcomes Indicators

State program managers will collaborate with lead program staff at each grantee to implement a quarterly review of performance and outcomes indicators. This quarterly review will include indicators identified as priorities for the FaDSS model as a whole, as well as priorities identified by each grantee according to local strengths, needs, or gaps.

Schedule of Activities

Activity	Data Reviewed	Timeframe	Attendees
<i>Initial Contact</i> <ul style="list-style-type: none"> Review prior SFY performance indicators identified in the grant application and contract. Discuss current SFY performance measures identified in the contract; select indicators identified by the grantee and/or program manager. 	Prior SFY outcomes and performance data; contract measures and grant application.	August 15 – August 30	DCAA FaDSS program manager; FaDSS Coordinator, Supervisor, and/or Team Lead
<i>Quarterly Contact</i> Review quarterly performance related to contract measures and selected indicators. Develop plan to maintain or enhance program performance.	1 st Quarter SFY Data (July - September)	October 15 – October 30	DCAA FaDSS program manager; FaDSS Coordinator, Supervisor, and Team Lead
<i>Quarterly Contact</i> Review quarterly performance/annual performance related to contract measures and selected indicators. Develop plan to maintain or enhance program performance.	2 nd Quarter SFY Data (October - December)	January 15 – January 31	DCAA FaDSS program manager; FaDSS Coordinator, Supervisor, and Team Lead
<i>Quarterly Contact</i> Review quarterly performance/annual performance related to contract measures and selected indicators. Develop plan to maintain or enhance program performance.	3 rd Quarter SFY Data (January - March)	April 15 – April 30	DCAA FaDSS program manager and FaDSS Coordinator, Supervisor, and Team Lead
<i>Quarterly Contact</i> Review quarterly performance/annual performance related to contract measures and selected indicators. Discuss initial plans for the upcoming year.	4 th Quarter SFY Data (April –June)	July 15 – August 15	DCAA FaDSS program manager; FaDSS Coordinator, Supervisor, and Team Lead

Review Methodology

Contacts with grantees will primarily occur via a teleconference call within the timeframes outlined in the schedule of activities table. Grantees that are not receiving a model fidelity review will have at least one of the contacts occur in person at the grantees office. Grantees may request other assistance from their program manager as needed.

Initial Contact

An initial conversation will be held via teleconference between DCAA FaDSS program managers and program leadership (coordinator or other program management) at each agency in August of each SFY. The purpose of these calls will be to 1) review the prior SFY's performance and outcomes indicators and 2) identify performance and outcomes indicators to be monitored in the current SFY. In addition to contract measures, program staff may work with DCAA FaDSS program managers to identify performance measures of mutual interest to monitor throughout the coming year.

Quarterly Contacts

DCAA FaDSS program managers will, in partnership with program staff, conduct quarterly contacts to review quarterly and cumulative data related to performance and family outcomes. Discussions may result in the development of plans to enhance or maintain program performance, including the identification and provision of training and technical assistance.

Annual Written Report

DCAA will compile a written report summarizing all activities that occurred in the quarterly contacts as well as the annual outcomes for each grantee. This report will be completed within 30 days of the completion of the 4th quarter contact. The report will be sent to the agency board chair, executive director and the FaDSS Coordinator.

Documentation

Forms utilized in the performance and indicators review:

- Quality Assurance Plan Template
- QA Contact Summary
- Annual Written Report

Review of Model Fidelity

To complement insights gained by the regular review of program performance and outcomes data, a review of model fidelity will also be conducted onsite for each FaDSS grantee in alternating years. This review will include an evaluation of adherence to the FaDSS program standards. All programs will be evaluated by a minimum of two program managers to assure inter-rater reliability. All FaDSS standards will be reviewed for compliance with the exception of standards specifically designated as "Technical Assistance."

The review is completed in four phases: 1) Pre-review; 2) Desk Review; 3) Visit; 4) Report and Response. An overview of each phase is provided below.

Phase 1: Pre-Review (*completed six weeks prior to the visit*)

- DCAA and the grantee's FaDSS Coordinator will determine the dates of the review. Dates should be arranged at least six weeks in advance of the visit or as agreed upon by both parties. The DCAA will work with the grantee to set up a home visit observation to be conducted at the visit. Formal review materials will be provided to agency and program leadership once dates have been confirmed. Review materials include:
 - A draft agenda detailing the review activities. DCAA will confirm the schedule once any adjustments to the draft have been made and agreed upon.
 - A list of recently exited family names (two files per FTE specialist and one file for less than a 49% FTE) for file reviews completed during Phase 2. Grantees will make arrangements to provide DCAA with requested files within 2 weeks of receiving the list.

Phase 2: Desk Review (*timeframe will span approximately 4 weeks*)

- DCAA will complete a review of exited family files at DCAA offices. The review will monitor compliance with FaDSS standards 2 – 19 and 23 and will be documented in the FaDSS File Review form. FaDSS files will remain secure when not in use in accordance with Standard 28 of the FaDSS program standards. (1 – 3 days)
- DCAA staff will review the agenda with the FaDSS Coordinator and make adjustments if necessary.

Phase 3: Visit (*timeframe typically spans 1 - 2 days*)

- DCAA will review documentation of families not enrolled and placed on the waiting list. This includes a review of Standard 2 (1 hour).
 - DCAA will randomly select files for families not enrolled and those placed on the waiting list according to the grantee's method of storing pre-enrollment documentation.
- DCAA will conduct a group interview of all FDS staff (1 to 1 ½ hours).
 - Management will not be present.
 - Coordinators/Supervisors that have a caseload will not be included.
 - DCAA will assess FDS knowledge and understanding of program standards. This will provide documentation of the agency's implementation of policy as well as procedures and processes used to assure compliance with program standards.
- DCAA will review personnel files and other supervisory records for compliance with standards 20, 24, 26, and 27. These standards will be reviewed for all FaDSS staff (FDS, Supervisor, Management and Support) and will be documented on the Personnel Review and the Supervisory and Administrative Review forms and will be included on the onsite report (1 hour).
- DCAA will conduct a home visit observation. This will be documented on the home visit observation and included in the onsite report. DCAA may request that a family focus group be conducted, if agreed upon by both parties (1 – 2 hours).
- DCAA will conduct a management review with key program leadership (Coordinator and/or Supervisor; 1 to 1.5 hours).
 - DCAA will review program supervision records for Standards 20 – 22, 26 and 28.
 - DCAA will review any personnel or file review findings.
 - DCAA will lead discussion on the strengths/challenges of the program.
 - DCAA and grantee will discuss the program's plans for continuous quality improvement.

- DCAA will discuss organizational standards and corresponding reports from the agency's accrediting body. For grantees that are following the CSBG standards, DCAA FaDSS staff will obtain organizational information from DCAA CSBG program staff.
- DCAA staff will review documentation of organizational standards for compliance for grantees that adhere to the FaDSS Organizational Standards. (3 hours)
- DCAA will meet one-on-one with specialists and their supervisor to discuss reviews of family files (30-45 minutes per FDS).
 - DCAA will review compliance with standards 2 – 19 and 23.
 - DCAA will discuss strengths/challenges.
 - DCAA will address questions raised by staff.
- DCAA will conduct an Exit Interview for agency and program leadership (*Program Management, Executive Director, FDS, Fiscal, Human Resources and others invited by the program*; 1 hour). The interview will include the following:
 - An overview of the review process.
 - A discussion of preliminary findings of the FaDSS Standards.
 - A discussion of program strengths.
 - A discussion of suggestions for enhancement.
 - A discussion of activities and procedures identified in Phase 3.

Phase 4: Report and Response

- DCAA will compile a formal report of all findings from the review. This report will be completed within 60 days after the date of the exit interview and will be sent to the agency board chair, executive director and the FaDSS Coordinator.
 - The report will provide a summary of compliance with organizational standards.
- Supporting documentation for the report will be sent to the agency's FaDSS Coordinator and will include the following:
 - The FaDSS Family File Review and Companion,
 - Supervisory and Administrative Review form,
 - Personnel Review form, and
 - Home Visit Observation form.
- The agency's executive director will submit a written response to the final report, if required in the final report. Responses are required for any standards not meeting expectations and must include a plan to address those areas not meeting expectations (action plan).
- DCAA will accept the action plan or work with grantee to get the action plan approved.
- DCAA will send an acceptance letter to the grantee.
- Grantee will implement action plan.
- Approximately three months after approval DCAA will monitor to ensure that the action plan was implemented.

Review Methodology

Standards	Threshold for Compliance
1	Not applicable.
2	All non-enrollment and waiting list documentation will be combined with referral documentation from enrolled files. Seventy percent of documentation reviewed must meet the criteria for the standard in order for the standard to be met.
3-5	Seventy percent of files reviewed must meet the criteria for the standard in order for the standard to be met.
6	<ul style="list-style-type: none"> Any breach of confidentiality (with the exception of instances such as imminent harm or the reporting of suspected child abuse) will result in an overall "needs improvement." A breach of confidentiality involves releasing confidential information without written authorization when such authorization is legally required. Seventy percent of files reviewed must meet the technical criteria outlined in bullets 2 through 5 of the standard.
7-19	Seventy percent of files reviewed must meet the criteria for the standard in order for the standard to be met.
20-28	All documentation reviewed must meet the criteria for the standard in order for the standard to be met.
1-15 Organization Standards	See discussion below and guidelines provided in FaDSS Organizational Standards Review Process.
All	Standards that include deadlines: if the deadline (i.e. 10 th of the month) falls on a nonworking day, the deadline is assessed as meeting the standard if completed on or before the next business day.

Documentation

Forms completed by DCAA to document standard compliance include:

Final Report	FaDSS Family File Review and Companion (FaDSS File Review form)
Supervisory and Administrative Review	Personnel Review for FDS, Supervisor, Management and Support
Home Visit Observation	Documentation of Staff Interviews
File Review Waiting List and Non-enrolled Form	

Review of Organizational Standards

FaDSS organizational standards will be reviewed for compliance as identified in the FaDSS Organizational Standards Review Process. These standards may include National Standards for Community Services Block Grant (CSBG), Council on Accreditation, Commission on Accreditation of Rehabilitation Facilities, Iowa Family Support Standards, and FaDSS Organizational Standards.

- During Phase 3, DCAA will arrange time to meet with agency and program leadership to discuss compliance with FaDSS organizational standards. The agency will provide documentation of the most recent review/accreditation. This documentation must include information that the organization is accredited and the timeframe for the accreditation. For agencies that are adhering to the FaDSS Organizational Standards the Standards are reviewed during phase 3. The agency must have all documentation available for review. For agencies that identified CSBG standards, FaDSS State Program Managers will obtain information from CSBG program personnel at the DCAA.

Fiscal Review

FaDSS Program Managers will confer with fiscal staff within the Department of Human Rights to review findings from the last monitoring visit. Fiscal monitoring is completed annually. The results of those visits will be incorporated in Phase 3 during the management review.